Impatitis NO12

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admitted March 24th 1821

An Inaugural essay

on

Hepatitis

Submitted to the examination of

The Trustees and medical Faculty

of the

University of Pennsylvania

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An essay

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Hepatitis acuta

The liver and its membranes like most other parts of the body are liable to inflammation under two forms; the acute and chronic. Dr Cullen supposes the acute exists when ~~the~~ inflammation attacks the enveloping membrane, and calls the disease chronic when the parenchyma of the liver is ~~the~~ affected. Dr Saunders conceives that the acute inflammation takes place when the extremities of the hepatic artery are affected; and the chronic when the branches of the hepatic vein or vena portae, which conveys

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the principal portion of the blood to the liver is the seat of morbid action. Dr Cullen objects to this distinction and thinks there is neither evidence nor probability in support of it. But it seems to me the terminology of Dr Cullen educed from his distinction is somewhat objectionable as we have no analogy in names given to similar forms of disease in other parts.

We ~~now~~ do not characterize inflammation of the enveloping membrane of the lungs by the exclusive epithet acute; nor when the substance of the lungs is affected do we call it chronic on that account. On the contrary both these parts may be affected with the acute or chronic forms of inflammation. The same remark I think applies to the liver as well as to the other viscera of the body.

The former writer does not show cause or give a just reason why acute inflam-

mation cannot attack the parenchyma of the liver as well as the investing membrane. I therefore call the inflammation of the liver acute when the symptoms described by the celebrated nosological writer of Edinburgh take place, viz. "Pyrexia; hypochondrii dextri tensio et dolor, saepe pungens pleuritici instar, saepius obtusus; dolor ad clavicularem et summum humeri dextri; decubitus in sinistrum latus difficilis; dyspnoea; tussis sicca; vomitus; singultus." and chronic when the following observations will apply. "Haec saepe nulla quibus dignoscatur signa praebet; aliquando tamen eandem adesse suspicari potest, ex hepatitidis causis quibusdam praegressis, ex sensu quodam plenitudinis et gravitatis in hypochondrio dextro, ex doloribus plus minusve pungentibus in eadem

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parte subinde perceptis, ex dolore quodam a pressu hypochondrio dextra vel a decubitu in latus sinistrum sentito, et denique ex pyrexia leviori cum dictis signis subinde infestante.

I am led to adopt this distinction from having been taught that Practitioners of medicine can prescribe only for symptoms — and that any division drawn from the supposed location of disease can lead to no practical result, inasmuch as certainty can be obtained only by the dissecting knife.

Hepatitis like other inflammations may terminate in resolution suppuration and abscess, sometimes in gangrene, or it may lead to chronic induration or scirrhus of the liver.

I think it impossible that acute and chronic hepatitis can exist at the

same time in the same part

The resolution of inflammation of the liver is often accomplished by an early and judicious use of the remedies to be enumerated presently

But if the symptoms of fever and local pain do not abate, but on the contrary continue violent or increase for several days, suppuration will probably take place. The commencement of the formation of pus is indicated principally by rigors, succeeded by a sense of weight and oppression in the right hypochondrium, with a throbbing pulsation in the affected side when lying on it.

It has been supposed by some that inflamanations of the liver do not terminate in gangrene or mortification. Dr Saunders says "I have seen some instances where the pain and inflammation have subsided suddenly,

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and have been succeeded by a low fluttering pulse, cold extremities, deliquium, and death, so that there has been reason to suspect that this organ may on some occasions though much less frequently than others become gangrenous." But in Morgagni de ~~sedibus et causis~~ morborum a case is related which proves positively that the liver becomes gangrenous I now quote his words "Senex annos natus quatuor & septuaginta, gracilis, vinosus, ante mensem incedere sic inceperat, ut sinistro potissimum cruri incumberet. Quod domestici magis, quam ipse, animadverterant; nihil ente ipse de hoc dicebat, aut uspiam dolore se ostendebat. Duodeviginta post diebus dolore ventris correptus est vago, nullaque cum febre conjuncto, quem ipse, nemine consulto, theriaca sumpta expulit. Sed duodecim interjectis diebus ortus circa meridiem dolor est ad

summam regionem ilracam dex tram simul gravans, simul ex simulis, ut ajebat, quem mordentes afferent canes. Tumebat is locus, sed nec colorem mutaverat, &, si tangeres, mollis erat; manu autem profundius appressa, durum percipiebas. Pulsus, caeteroquin laudabilis, celer, & frequens erat. Pedes intra arbitas subsidebant. Lingua sicca. Nox mala. Die morbi altera pulsus major, & vibratus. Dolor, & tumor se ad ventris medium extendebant, qui demum sinistrorsum quoque porrexerunt. Sanguis e dextero brachio missus ad uncias septem, nihil seri; crassam, autem, & flavam habuit crustam. Aurea erat quidem, non ea tamen, ut cibus respueretur. Alvus sine malitia exonerabatur. Nox pessima. Die tertia pulsus humilis: ructus crebri, amari. acidi: loquela quasi a commutatione vitiata: mens sub-

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inde non constans, ut insania, & nugae, quas aeger narrabat, astendebant. Die quarta ~~[illegible]~~ artus identidem convellebantur, totumque corpus rigidum ad quadrantem horae permanebat: quae dum fierent, nulli erant pulsus: & vicissim, soluta convulsione, hi quoque redibant; & sanorum quidem in caeteris similes; sed humiles, & prementibus digitis non ~~[illegible]~~ resistentes, Postea difficili facta respiratione, etsi lingua demum erat jam humida, neque homo amplius deliriabat, faeces vomuit, & paulo post ad vesperam diei ejusdem convulsus mortuus est. Abdomine deducto, sinister jecoris lobus inventus est laxus, & sphacelo prorsus vitiatus. Ventriculus, & intestina, tenuia praesertim, hic rubra, istic livida, illic nigra. Coli autem initium, qua musculos contingebat, cavam ~~[illegible]~~ illi faciem

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operientes, simul cum ipsis & gangrena omnino occupatum erat; sic connexum, ut sine laceratione separari non potuerit. Illinc videbatur effusum esse quod in ventris cavo conspectum fuerat serum lividum & puri admixtum, cui nempe simile intestina continebant."

The last cited case evidently shows that gangrene takes place in the substance of the liver to a great degree; and if acute inflammation can only attack the envelopping membrane, I would ask how it is possible that the substance of the liver becomes gangrenous, as mortification according to the present opinions can arise only from two causes viz want of nourishment and excess of inflammatory action

The diagnosis of Hepatitis is not always easy to be made in consequence of the vicinity of the organ diseased to

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to other viscera. It is sometimes mistaken for inflammation of these organs viz. for pleurisy or peripneumony ~~or~~ gastritis. It may occasionally be mistaken for spasm of the gall ducts and for rheumatic affections of the neighbouring parts. Dr. Pemberton distinguishes Pulmonic inflammation from Hepatitis 1st By remarking that in the latter complaint a gradual inspiration does not produce cough although it increases pain. 2ndly that the pain is increased by gentle pressure under the margin of the ribs which is not the case in pulmonic complaints and 3ly that the cough if it is present is found to have succeeded not preceded or have been coeval with it as in pleurisy

From gastritis the hepatic inflammation may be distinguished by the absence of that extreme sense of heat and pain

Chilcoxen

with which the inflamed stomach is infested. Nor is the prostration of strength so great in hepatitis as in inflammation of the stomach

Inflammation of the liver may be distinguished from spasm of the gall ducts, by, as is said, the presence of nausea, by the pain being permanent, by the usual symptoms of Pyrexia, and the patient feeling more ease in an erect than in a flexed posture of the body.

The causes of Hepatitis are not easily discerned. With respect to the predisposition to this disease it has been observed most frequently in the male sex and not until the adult period of life. The exciting causes are partly those which induce general inflammatory affections and partly those which occasion an excitement of the circulation of the liver. Among the former causes may be mentioned external violence from contusions, falls &c sudden vicissitudes

of temperature; and the application of cold. Among the latter causes are violent bodily exercise; intemperance in the use of spirituous liquors; and continued great heat of climate or season.

Of the cure of Hepatitis acuta

We commence the cure of Hepatitis by arresting as speedily as possible the inflammatory process. In the commencement blood must be drawn by a large orifice. Fifteen or twenty ounces must be taken in as short time as possible and subsequent bleedings must be governed according to circumstances. If the patient be plethoric and the pulse active he will bear to lose more and vice versa. The appearance of the blood must also be taken into consideration. But it can only be considered as a safe guide in conjunction with the pulse the degree of pain and other

symptoms. If the buff after remaining five or six hours after venesection become firm opake, and have a concave surface have puckered edges, the pulse be hard, and the degree of pain be not diminished we may feel secure in drawing more blood. If on the contrary the buff after an equal time be semitransparent have a greenish yellow colour general bleeding may be omitted, I should then have recourse to topical bloodletting blistering and such local application as would produce a free discharge

Cathartics should be early employed as they act more particularly on the part affected unloading the vessels by aiding the passage of bile and producing a determination of blood to the surface of the intestines. Some difference of opinion exists amongst practitioners with

regard to the nature of the cathartic most useful, some recommend the neutral salts. but Calomel as it is said to act high up in the intestines certainly claims reference

In order to maintain my views of Hepatitis which I endeavoured to support before the professors of the University of Pennsylvania, I adduce the authority of Dr James Cusy a very intelligent physician of Guy's * Hospital in London, who had ample opportunities of treating Hepatitis both in England and in India w... .. is almost endemic. He gives a decided preference to mercurial purgatives and especially to calomel. He expressly attributes its efficacy in the cure of Hepatitis to its qualities as an evacuant (in the copy of ~~th~~ his letter which is before me the word evacuant is emphatically placed in Italic letters)

for he accords with the opinions of the best writers, that the general action of mercury on the constitution, were it practicable to accomplish this intention in a shorter time than is almost always required, would be injurious in the early and highly inflammatory stage of the disease. The superior efficacy of calomel he ascribes to its peculiar quality of evacuating the ducts of the liver: and considers its operation in this way as often diminishing or superseding the necessity of bloodletting. He illustrates the advantage of thus "emptying the biliary ducts" by the great and speedy relief afforded by drawing out the milk from the mamma when this gland becomes inflamed after parturition.

In looking over a paper on Hepatitis I found a sentence which accords with my ideas so nearly that I cannot do

better than make an extract from it

"We have omitted, hitherto, to mention the administration of mercury in the treatment of hepatitis. A very mischievous opinion, ~~[illegible]~~ derived from the practitioners in India, has for some time prevailed, that mercury is specific in every disease of the liver; and that even in active phlegmonous inflammation of this viscus it will prevent suppuration. This opinion, which has been built on the success of mercurials in chronic inflammation of the liver, has led to an empirical practice, in which no discrimination is made between forms of disease, which differ more in their nature, than in the name imposed upon them. And there can scarcely be a doubt, from the known effects of mercury ~~upon~~ on the body, that, if it be incautiously

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employed in the active period of inflammation, it will increase the action of the arterial system, (already too much quickened and therefore tend directly to accelerate, and not retard, the suppurative process. It appears, indeed, that many judicious and successful practitioners in India do not administer mercury, until the violence of the inflammatory action has been moderated by bleeding, active purging, and the antiphlogistic plan of treatment. We are now speaking of the administration of mercury in such a way as to produce the peculiar effects of that metal on the constitution at large".